

**BLAKELY SOKOLOFF TAYLOR & ZAFMAN LLP**

TELEPHONE: (714) 557-3800

INTELLECTUAL PROPERTY LAW  
12400 WILSHIRE BOULEVARD, 7TH FLOOR  
LOS ANGELES, CA 90025

FACSIMILE: (714) 557-3347

**RECEIVED  
CENTRAL FAX CENTER****AUG 09 2005****FACSIMILE COVER SHEET**

Deliver to: Zachary Pape, USPTO Art Group: 2835  
 Facsimile No.: 703-872-9306 Date: August 9, 2005  
 From: William W. Schaal, Reg. No. 39,018  
 Our Docket No.: 6639P012 Number of pages 14 including this sheet.  
 Application No.: 10/798,488 Filing Date: 3/11/2004  
 Docket Due Date(s): 8/9/2005

Enclosed are the following documents:

<input checked="" type="checkbox"/> Amendment <u>Response</u> ( <u>10</u> pgs)	<input type="checkbox"/> Issue Fee Transmittal
<input type="checkbox"/> Appeal Brief ( <u>    </u> pgs)	<input type="checkbox"/> Notice of Appeal
<input type="checkbox"/> Application: <u>                    </u> ( <u>    </u> pgs) w/cover & abstract	<input type="checkbox"/> Petition for: <u>                    </u>
<input type="checkbox"/> Assignment & Cover Sheet ( <u>    </u> pgs)	<input type="checkbox"/> Request for Continued Examination (RCE)
<input checked="" type="checkbox"/> Certificate of <u>Facsimile</u>	<input type="checkbox"/> Reply Brief ( <u>    </u> pgs)
<input type="checkbox"/> Continued Prosecution Application (CPA)	<input type="checkbox"/> Request & Certification Under 35 USC 122(b)(2)(B)(i)
<input type="checkbox"/> Declaration & POA ( <u>    </u> pgs)	<input type="checkbox"/> Request to Rescind Previous Nonpublication Request
<input type="checkbox"/> Drawings: <u>    </u> sheets, <u>    </u> figures	<input type="checkbox"/> Response to Notice of Missing Parts & Formalities Letter
<input type="checkbox"/> Extension of Time: <u>                    </u>	<input type="checkbox"/> Response to Written Opinion ( <u>    </u> pgs)
<input checked="" type="checkbox"/> Fee Transmittal (in duplicate)	<input type="checkbox"/> Terminal Disclaimer
<input type="checkbox"/> IDS & PTO/SB/08 ( <u>    </u> pgs)	<input type="checkbox"/> Transmittal of Publication Fee Due
<input type="checkbox"/> Other <u>                                    </u>	<input checked="" type="checkbox"/> Transmittal Letter

**CERTIFICATE OF MAILING/TRANSMISSION (37 CFR 1.8A)**

I hereby certify that this correspondence is being transmitted by facsimile on the date shown below to the United States Patent and Trademark Office.

  
 Susan McFarlane

8/9/2005

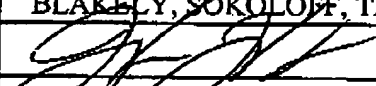
Date

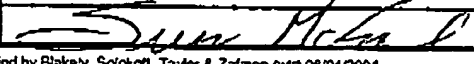
**Confidentiality Note:** The documents accompanying this facsimile transmission contain information from the law firm of Blakely, Sokoloff, Taylor & Zafman which is confidential or privileged. The information is intended to be for the use of the individual or entity named on this transmission sheet. If you are not the intended recipient, be aware that any disclosure, copying, distribution or use of the contents of this faxed information is prohibited. If you have received this facsimile in error, please notify us by telephone immediately so that we can arrange for the retrieval of the original documents at no cost to you.

If you do not receive all the pages, or if there is any difficulty in receiving, please call: (714) 557-3800 and ask for Susan McFarlane.

<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>		Application No.	10/798,488
		Filing Date	March 11, 2004
		First Named Inventor	Tomohiro Hamada
		Art Unit	2835
		Examiner Name	Zachary Pape
Total Number of Pages in This Submission	13	Attorney Docket Number	6639P012

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> PTO/SB/08 <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; height: 60px; width: 100%;"></div>
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	William W. Schaal, Reg. No. 39,018 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	
Date	August 9, 2005

CERTIFICATE OF MAILING/TRANSMISSION			
I hereby certify that this correspondence is being transmitted via facsimile on the date shown below to the United States Patent and Trademark Office.			
Typed or printed name	Susan McFarlane	Date	August 9, 2005
Signature			

Based on PTO/SB/21 (04-04) as modified by Blakely, Sokoloff, Taylor & Zafman (wtr) 08/04/2004  
 SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

# FEE TRANSMITTAL for FY 2005

*Patent fees are subject to annual revision.*

☐ Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$) 0.00

## Complete if Known

Application Number 10/798,488  
Filing Date March 11, 2004  
First Named Inventor Tomohiro Hamada  
Examiner Name Zachary Pape  
Art Unit 2835  
Attorney Docket No. 6639P012

## METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit card ☐ Money Order ☐ None ☐ Other (please identify):  
☒ Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee  
☒ Charge any additional fee(s) or underpayment of fee(s) under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20. ☐ Credit any overpayments

## FEE CALCULATION

### 1. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
20	0	50.00	\$0.00
Independent Claims	3	200.00	\$0.00
Multiple Dependent			
Large Entity	Small Entity	Fee Code	Fee Description
1202 50	2202 25		Claims in excess of 20
1201 200	2201 100		Independent claims in excess of 3
1200 360	2203 180		Multiple Dependent claim, if not paid
1204 300	2204 150		**Reissue independent claims over original patent
1205 300	2205 150		**Reissue claims in excess of 20 and over original patent
SUBTOTAL (1)			\$0.00

\*For number previously paid, if greater. For Reissues, see below

### 2. ADDITIONAL FEES

Large Entity	Small Entity	Fee Code	Fee Description	Fee Paid
1051 130	2051 65		Surcharge - late filing fee or oath	
1052 50	2052 25		Surcharge - late provisional filing fee or cover sheet	
2053 130	2053 65		Non-English specification	
1251 120	2251 60		Extension for reply within first month	
1252 450	2252 225		Extension for reply within second month	
1253 1,020	2253 510		Extension for reply within third month	
1254 1,390	2254 695		Extension for reply within fourth month	
1255 2,160	2255 1,080		Extension for reply within fifth month	
1401 500	2401 250		Notice of Appeal	
1402 500	2402 250		Filing a brief in support of an appeal	
1403 1,000	2403 500		Request for oral hearing	
1451 1,510	2451 1,510		Petition to institute a public use proceeding	
1450 130	2450 65		Petitions to the Commissioner	
1807 50	1807 25		Processing fee under 37 CFR 1.17(d)	
1806 180	1806 90		Submission of Information Disclosure Sheet	
1809 790	1809 395		Filing a submission after final rejection (37 CFR § 1.120(a))	
1810 790	2810 395		For each additional invention to be examined (37 CFR § 1.120(b))	
Other fee (specify)				
SUBTOTAL (2)				\$0.00

## SUBMITTED BY

Name (Print/Type) William W. Schaal Registration No. 39,018 Telephone (714) 557-3800  
Signature [Signature] Date 08/09/05

Based on PTO/SB-17 (12-04) as modified by Blakely, Sokoloff, Taylor & Zafman (vtr) 12/5/2004.  
SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

# FEE TRANSMITTAL for FY 2005

*Patent fees are subject to annual revision.*

☐ Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$) 0.00

## Complete if Known

Application Number 10/798,488  
Filing Date March 11, 2004  
First Named Inventor Tomohiro Hamada  
Examiner Name Zachary Page  
Art Unit 2835  
Attorney Docket No. 6639P012

## METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit card ☐ Money Order ☐ None ☐ Other (please identify):  
☒ Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee  
☒ Charge any additional fee(s) or underpayment of fee(s) under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20. ☐ Credit any overpayments

## FEE CALCULATION

### 1. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
20	20	0	\$0.00
Independent Claims	3	5	\$0.00
Multiple Dependent			
Large Entity	Small Entity		
Fee Code (\$)	Fee Code (\$)	Fee Description	
1202 50	2202 2A	Claims in excess of 20	
1201 200	2201 100	Independent claims in excess of 3	
1203 360	2203 100	Multiple Dependent claim, if not paid	
1204 300	2204 150	**Reissue independent claims over original patent	
1205 300	2205 150	**Reissue claims in excess of 20 and over original patent	
SUBTOTAL (1)			\$0.00

\*or number previously paid, if greater. For Reissues, see below

### 2. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code (\$)	Fee Code (\$)		
1051 130	2051 65	Surcharge - late filing fee or oath	
1052 60	2052 25	Surcharge - late provisional filing fee or cover sheet	
2053 130	2053 130	Non-English specification	
1251 120	2251 60	Extension for reply within first month	
1252 450	2252 225	Extension for reply within second month	
1253 1,020	2253 510	Extension for reply within third month	
1254 1,600	2254 795	Extension for reply within fourth month	
1255 2,160	2255 1,080	Extension for reply within fifth month	
1401 600	2401 250	Notice of Appeal	
1402 500	2402 250	Filing a brief in support of an appeal	
1403 1,000	2403 500	Request for oral hearing	
1451 1,510	2451 1,510	Petition to institute a public use proceeding	
1400 130	2480 130	Petitions to the Commissioner	
1807 50	1807 50	Processing fee under 37 CFR 1.17(a)	
1806 180	1806 180	Submission of Information Disclosure Sheet	
1809 790	1809 395	Filing a submission after final rejection (37 CFR § 1.128(e))	
1810 790	2810 395	For each additional invention to be examined (37 CFR § 1.128(b))	
Other fee (specify)			
SUBTOTAL (2)			

## SUBMITTED BY

Name (Print/Type) William W. Schaaf

Registration No. 39,018

## Complete (if applicable)

Telephone (714) 557-3800

Signature

Date 08/09/05

Based on PTO/SB/17 (12/04) as modified by Blakely, Sokoloff, Taylor & Zafman (w/12/16/2004).  
SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

Appl. No. 10/798,488  
Amdt. Dated 08/09/2005  
Reply to Office Action of May 12, 2005

**RECEIVED**  
**CENTRAL FAX CENTER**  
**AUG 09 2005**

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Application. No. :	10/798,488	Confirmation No. 6291
Applicant :	Tomohiro Hamada	
Filed :	03/11/2004	
TC/A.U. :	2835	
Examiner :	Zachary Pape	
Docket No. :	006639.P012	
Customer No. :	8791	

Commissioner for Patents  
PO Box 1450  
Alexandria VA 22313-1450

**AMENDMENT**

Sir:

In response to the Office action of May 12, 2005, please amend the above-identified application as follows:

**Amendments to the Specification** are set forth on page 2 of this paper.

**Amendments to the Claims** are reflected in the listing of claims, which begins on page 3 of this paper.

**Remarks/Arguments** begin on page 7 of this paper.